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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/424,431	03/16/2000	John W. Wong	287300022USA	7974
	7590 07/08/200 ER, GILSON & LION:		EXAM	IINER
P.O. BOX 10395			MENDOZA, MICHAEL G	
CHICAGO, IL	00010		ART UNIT	PAPER NUMBER
			3734	
			MAIL DATE	DELIVERY MODE
			07/08/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	09/424,431	WONG ET AL.	
interview Summary	Examiner	Art Unit	
	MICHAEL G. MENDOZA	3734	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>MICHAEL G. MENDOZA</u> .	(3)		
(2) <u>JOHN FREEMAN</u> .	(4)		
Date of Interview: <u>17 June 2008</u> .			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) <mark> applicant's representative</mark>	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) <u></u> No.		
Claim(s) discussed:			
Identification of prior art discussed:			
Agreement with respect to the claims f) was reached. ♀	g)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>examiner to correct typogamendment.</u>			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	copy of the amendments that v		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	e last Office action has already OF ONE MONTH OR THIRT` ERVIEW SUMMARY FORM,	been filed, APP Y DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	

Application No.

Applicant(s)